## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

16778118

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |                |                             |                      |                                     |        | SMALL I  | ENTITY                 | OR        | OTHE                | R THAN<br>ENTITY       |
|--|--|---|----------------|-----------------------------|----------------------|-------------------------------------|--------|----------|------------------------|-----------|---------------------|------------------------|
| TOTAL CLAIMS   |  |   | 20             |                             |                      |                                     |        | RATE     | .FEE                   | ٦.        | RATE                | FEE                    |
| FOR  |  |   | NUMBER FILED   |                             | NUMBER EXTRA         |                                     |        | BASIC FE | E 385.00               | OR        | BASIC FEE           | 770.00                 |
| TOTAL CHARGEABLE CLAIMS  |  |   | 10 minus 20= * |                             |                      |                                     |        | X\$ 9=   |                        | OR        | X\$18=              |                        |
| INDEPENDENT CLAIMS   |  |   | minus 3 = *    |                             |                      |                                     |        | X43=     |                        | 1         | X86=                | · ·                    |
| MULTIPLE DEPENDENT CLAIM PR  |  |   | RESENT         |                             |                      |                                     |        | A43=     | -                      | OR        | X00=                |                        |
| * If the difference in column 1 is less than zero enter "0" in column 2  |  |   |                |                             |                      |                                     |        | +145=    |                        | OR        | +290=               |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                |                             |                      |                                     |        | TOTAL    |                        | OR        | TOTAL               |                        |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |                |                             |                      |                                     |        | SMALL    | ENTITY                 | OR        | OTHER<br>SMALL      |                        |
| Г  | 1  | CLAIMS                                      |                | HIGHE                       |                      | 1 .                                 | 7 .    |          | T 400:                 | <b>7</b>  |                     |                        |
| AMENDMENT A  |  | REMAINING<br>AFTER<br>AMENDMENT             |                | NUMBI<br>PREVIOL<br>PAID F  | JSLY                 | PRESENT<br>EXTRA                    |        | RATE     | ADDI-<br>TIONAL<br>FEE |           | RATE                | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus          | **                          |                      | =                                   |        | X\$ 9=   |                        | OR        | X\$18=              |                        |
| AME  | Independent                                    | *   | Minus          | ***                         |                      | =                                   | -      | X43=     |                        | OR        | X86=                | ·                      |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                             |                      |                                     | İ      | +145=    |                        | 1 1       | +290=               |                        |
|  |  |   |                |                             |                      |                                     | L      | + 14J=   |                        | OR        | 723U-               |                        |
|  |  |   |                |                             |                      |                                     |        |          |                        | OR ,      | TOTAL<br>ADDIT, FEE |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                |                             |                      |                                     |        |          |                        | <b>.</b>  | NODII. FEE          |                        |
|  |  | CLAIMS                                      |                | HIGHE                       |                      |                                     | Г      | -        | 400                    | 7 6       |                     |                        |
| 8  |  | REMAINING                                   |                | NUMBE                       |                      | PRESENT                             | 11     | 5 ·      | ADDI-                  |           |                     | ADDI-                  |
| Ξ  |  | AFTER                                       |                |                             |                      |                                     | XTRA F | RATE     | TIONAL                 | 1 1       | RATE                | TIONAL                 |
| ME   |  | AMENDMENT                                   |                | PAID FO                     | JH                   | <del></del>                         | 1      |          | FEE                    | łŀ        |                     | FEE                    |
| AMENDMENT B  | Total  | *   | Minus          | **                          | ·<br>                | =                                   |        | X\$ 9=   |                        | OR        | X\$18=              |                        |
| AME  | Ind pendent                                    |   |                |                             |                      | = -                                 |        | X43=     |                        | OR        | X86=                |                        |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |   |                |                             |                      |                                     |        | +145=    |                        | OR        | +290=               |                        |
|  |  |   |                |                             |                      |                                     |        | TOTAL    |                        | OR .      | TOTAL               |                        |
| (Oaluma 4)   |  |   |                |                             |                      |                                     |        | DIT. FEE |                        | O   1   A | DDIT. FEE           | <del></del>            |
| _  |  | (Column 1)                                  |                | (Column                     |                      | (Column 3)                          |        |          |                        | ··.       |                     |                        |
| ပ  | `  | REMAINING                                   |                | NUMBE                       |                      | PRESENT                             | Г      |          | ADDI-                  |           |                     | ADDI-                  |
|  |  | AFTER                                       |                | PREVIOU                     |                      | EXTRA                               |        | RATE     | TIONAL                 |           | RATE                | TIONAL                 |
| <u> </u>   |  | AMENDMENT                                   |                | PAID FO                     | R                    |                                     |        | I        | FEE                    | <u> </u>  |                     | FEE                    |
| AMENDMENT  | Total  | *   | Minus          | **                          |                      | = .                                 |        | X\$ 9=   | *                      | OR        | X\$18=              |                        |
| ME   | Independent                                    |   | Minus          | ***                         |                      | =                                   |        | X43=     |                        |           | X86=                |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                             |                      |                                     |        |          |                        | OR        | 700-                |                        |
| * If the intry in column 1 is less than the entry in column 2 write "0" in column 2  |  |   |                |                             |                      |                                     |        |          |                        |           | +290=               |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE  ADDIT. FEE |  |   |                |                             |                      |                                     |        |          |                        |           |                     |                        |
| 7  | he "Highest Num                                | nuer Previously Paid<br>ber Previously Paid | For" (Total or | SPACE is le<br>Ind pendent) | ess than<br>is the l | । ਤ, enter "3."<br>highest number । |        | •        | r priate box           |           |                     |                        |
| The "Highest Number Previously Paid For" (Total or Ind pendent) is the highest number found in the apprepriate box in column 1.  |  |   |                |                             |                      |                                     |        |          |                        |           |                     |                        |